Fill in this in	formation to id	entify your case:		# 2
Debtor 1	Yvette	Marie	Web	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	16-51563	or the: Eastern District of	Michigan	
	(If known)		 _	

2816 AUG 3 Checkers is is an Checkers of the Court is in the Court of the Court of

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

ĝ	art 15. Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	s 0.00
	1a. Copy line 55, Total real estate, from Schedule A/B	\$
	1b. Copy line 62, Total personal property, from Schedule A/B	\$3,850.00
	1c. Copy line 63, Total of all property on Schedule A/B	s3,850.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 49,956.73
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	0.00
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	s <u>0.00</u>
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$157,437.42
	Your total liabilities	\$ 207,394.15
Ρ	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I)	1 654 87
4.	Copy your combined monthly income from line 12 of Schedule I	s1,654.87
	· · · · · · · · · · · · · · · · · · ·	s 1,654.87 s 2,560.33

Yvette

Marie

V/ebb

Case number (if known) 16-51563

Answer These Questions	for	Administrative	and	Statistical	Records

_	576 (A150c)		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	 No. You have nothing to report on this part of the form. Check this box and submit this for ✓ Yes 	m to the court with your other	r schedules.
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an ifamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	ndividual primarily for a perso es. 28 U.S.C. § 159.	onal,
	Your coots are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box a	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 120%-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ome from Official	s <u>1,643.</u> (
e se it is	na jaman kanan menengganaya kanan kanan menengganaya kanan kanan kanan kanan kanan kanan kanan kanan kanan kan	· · · · · · · · · · · · · · · · · · ·	
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:		
		Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
	9c. Claim or death or personal injury while you were intoxicated. (Copy line 6c.)	s0.00	
	9d, Student loans. (Copy line 6f.)	s11,299.00	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s0.00	
	9f. Debts -, pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	_
	9g. Total. Add lines 9a through 9f.	s11,299.00	
	grand the state of		

Debtor 1	Yvette	Marie	Webb	16-51563	
CD(O) 1	First Name	Middle Name	Last Name		
ebtor 2 oouse, if filin	ng) First Name	Middle Name	Last Name		
	-	rthe: Eastern District of	Mighinga		
	16 51562	the. Eastern District of	wichigan		
se numbe	er 10-31303			☐ Check if this is a	an
		···		amended filing	
fficia	l Form 106	A/B			
Sch	edule A/	B: Propert	ty	12/15	
i rt 1: Do you ☑ No.	Describe Each I own or have any Id Go to Part 2.	egal or equitable inter	• •	You Own or Have an Interest In nd, or similar property?	
	. Where is the prope	erty?	What is the property? Check all	Habita and	
1.1.	street address, if availa	ible, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Propert Current value of the Current value of	D: 'y. th e
<u> </u>	Dity	State ZIP Code	Investment property	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known	y
			Who has an interest in the pro	operty? Check one	
ō	County		☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	Check if this is community property (see instructions)	
			Other information you wish to property identification numbe	o add about this item, such as local er:	
lf you o	wn or have more th	an one, list here:	Property recommended number		
12			What is the property? Check all t Single-family home Duplex or multi-unit building	that apply. Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property	D:
S	Street address, if availa	able, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the Current value of entire property? portion you own	
-			- 🔲 Land	\$\$	_
			Investment property	Describe the nature of your ownership	
7	City State ZIP Co		Timeshare Other	interest (such as fee simple, tenancy by	y
			Ciner	the entireties, or a life estate), if known	
			Who has an interest in the proj		· _

Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtor 2 only

County

 $oxed{\Box}$ Check if this is community property

(see instructions)

Debtor 1	Yvette	Marie	Webb Case number (if known) 16-51563			
	First Name Mi	ddle Name Last Name				
			What is the property? C	heck all that apply.	Do not deduct secured cl	aims or exemptions. Put
1,3.			☐ Single-family home		the amount of any secure	d claims on Schedule D:
	Street address, if availa	ble, or other description	Duplex or multi-unit bu	ilding	Creditors Who Have Clair	тѕ Ѕесигеа ву Ргорепу.
			Condominium or coope	erative		Current value of the
			Manufactured or mobil	e home	entire property?	portion you own?
			☐ Land		\$	\$
			Investment property			
	City	State ZIP Code	☐ Timeshare		Describe the nature of interest (such as fee	
			Other		the entireties, or a lif	
			Who has an interest in t	he property? Check one.		
			Debtor 1 only			
	County		Debtor 2 only			
			Debtor 1 and Debtor 2 of	only	Check if this is co	mmunity property
			At least one of the debt	•	(see instructions)	
			Other information you v	vish to add about this ite	•	
			property identification r	iumber:		
			II of your entries from Par			\$0.00
you	iave attached for Fai	t i. wiite that number i	nere	•••••		
	-					
art 2:	Describe You	· Vehicles				
_	· · · · · · · · · · · · · · · · · · ·					
			st in any vehicles, whethe			S
ou own	that someone else dri	ves. If you lease a vehicle	e, also report it on Schedule	e G: Executory Contracts	and Unexpired Leases.	
Cars	vans trucks tracto	rs, sport utility vehicles	motorcycles			
. 5 21 N		is, sport utility verlicles	, motorcycles			
	-					
□ Y	es					
	Make:		Who has an interest in t	he property? Check one	Do not doduct accurad at	simo as assembliana Dut
3.1.	wake.		_	no property remain and	Do not deduct secured cla the amount of any secure	
	Model:		Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
	Year:		Debtor 2 only		Current value of the	Current value of the
	Approximate mileage	7.	Debtor 1 and Debtor 2 o	•	entire property?	portion you own?
		· 	At least one of the debte	ors and another		•
	Other information:				\$	\$
			☐ Check if this is comr instructions)	nunity property (see	Ÿ	¥ <u></u>
			manucuona <i>j</i>			
If you	own or have more that	an one, describe here:				
			Mha haa an internat in t	ha manmarki 2 Ob b		
3.2.	Make:		Who has an interest in t	ne property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:		Debtor 1 only		Creditors Who Have Clair	
	Year:		Debtor 2 only		Current value of the	Current value of the
			Debtor 1 and Debtor 2 o	•	entire property?	portion you own?
	Approximate mileage	·	At least one of the debte	ors and another	e	
	Other information:	***************************************			\$	\$
			Check if this is comm	nunity property (see	Ψ	Ψ
	1		instructions)			

btor 1	Yvette	Marie		Webb	Case number (if k	nown) 16-51563		
	First Name Middle	Name I	Last Name					
3.3.	Make:		_	Who has an interest in	the property? Check one.	Do not deduct secured cla		
	Model:		_	Debtor 1 only		the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Year:			Debtor 2 only				
	Approximate mileage:			Debtor 1 and Debtor 2		Current value of the entire property?	Current value of the portion you own?	
	•			At least one of the deb	tors and another			
	Other information:			☐ Check if this is com	munity property (see	s	s	
				instructions)	intuitity property (see			
		Committee of the commit	j					
3.4.	Make:		_	Who has an interest in	the property? Check one.	Do not deduct secured cla		
	Model:		_	Debtor 1 only		the amount of any secure Creditors Who Have Clain		
	Year:			Debtor 2 only		Current value of the	Current value of the	
	Approximate mileage:			Debtor 1 and Debtor 2	•	entire property?	portion you own?	
	Other information:			At least one of the deb	otors and another			
	Other information.		7	Check if this is com	munity property (see	\$	\$	
				instructions)	proporty (acc			
			J					
4.1.	Make:		[Debtor 1 only	the property? Check one.	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:	
	Year:			Debtor 2 only Debtor 1 and Debtor 2	only			
	Other information:			At least one of the deb	•	Current value of the entire property?	Current value of the portion you own?	
						ontino proporty.	portion you out	
				\square Check if this is com	munity property (see	\$	\$	
				instructions)				
If you	own or have more than	and list base.	J					
ii you	Own or have more than	one, list here.	,	A/h h itt i	4h			
4.2.	Make:			Debtor 1 only	the property? Check one.	Do not deduct secured cla the amount of any secured		
	Model:			Debtor 1 only Debtor 2 only		Creditors Who Have Clain	ns Secured by Property.	
	Year:			Debtor 1 and Debtor 2	only	Current value of the	Current value of the	
	Other information:		_	At least one of the deb	-	entire property?	portion you own?	
			and the same of th	Check if this is com	munity property (see	\$	\$	
		, white offer the second secon		mondono,				
Δ ΑΑ •	he dollar value of the	nortion vou es	ın for all	of your entries from Do	art 2, including any entries	s for names	0.00	
					in 2, including any entries		s0.00	
						l		

Debtor 1

5.

Debtor 1

Yvette First Name

Marie

Webb

Case number (if known)_16-51563

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
5. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
Yes. Describe Household furniture and furnishings	\$2,000.00
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
No Yes. DescribeTelevision, cell phone and video equipment	\$1,000.00
3. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
□ No □ Yes. Describe	3
Tes. Describe	<u> </u>
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
□ No	
Yes. Describe	\$
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	\$
Clather	
11 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
☐ No ☐ Yes. Describe Clothing and shoes	\$800.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
No No	
Yes. Describe	\$
13. Non-farm animals	
Examples: Dogs, cats, birds, horses ☑ No	
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
☑ No	
Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ 3,800.00
for Part 3. Write that number here	•

De	htor	1	

Yvette First Name

Marie

W∋bb

Case number (if known) 16-51563

Part 4	Describe You	ır Financial Assets				
Do yοι	Oo you own or have any legal or equitable interest in any of the following?					
	amples: Money you h	nave in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file	your petition		
				Cash:	\$	50.00
Exa	and other siz		ints; certificates of deposit; shares in credit unions, i ultiple accounts with the same institution, list each.	brokerage houses,		
u	Yes		Institution name:			
		17.1. Checking account:			\$	
		17.2. Checking account:			_	
		17.3. Savings account:			\$	
		17.4. Savings account:			\$	
		17.5. Certificates of deposit:				
		17.6. Other financial account:				
		17.7. Other financial account:				
		17.8. Other financial account:			-	
		17.9. Other financial account:				
Exa Z	mples: Bond funds, i	Institution or issuer name:	erage firms, money market accounts		\$ \$ \$_	
	n-publicly traded st LLC, partnership, a		rated and unincorporated businesses, including	an interest in		
Z		Name of entity:		of ownership:		
i	Yes. Give specific information about)% _%)%		
1	them)% _%		
				70	a	

20. Gov	ernment and corpo	orate bonds and o	other negotiable and non-negotiable instruments	
Neg Non	otiable instruments i	include personal cl	hecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
Z 1 :		mo are mose you	commot danser to someone by signing of delivering them.	
	es. Give specific	Issuer name:		
	nformation about hem			\$
		-		\$
				\$
21. Reti	rement or pension	accounts		
		RA, ERISA, Keogh	, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No Yes. List each			
	account separately.	Type of account:	Institution name:	
		401(k) or similar pla	n:	\$
		Pension plan:		\$
		IRA:		\$
		Retirement account	·	\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
Your Exar	rity deposits and passes of all unused on ples: Agreements of all unused on ples: Agreements of others	deposits you have	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications	
• •	10 (
LJ 1	es	Electric:	Institution name or individual:	
		Gas.		\$
		Heating oil:		\$ \$
		Security deposit on	rental unit:	\$
		Prepaid rent:		\$
		Telephone: Water:		\$
		Rented furniture:		\$
		Other:		\$ \$
				<u> </u>
		a periodic paymer	nt of money to you, either for life or for a number of years)	
Z N				
U Y	'es	Issuer name and d	escription:	e
				\$ \$
				\$

Case number (if known) 16-51563

Yvette First Name

Debtor 1

Marie

Webb

Debtor 1	Yvette	Marie	Webb	Case number (if known) 16-51563	
	First Name	Middle Name Last f	lame		
24. Interest	s in an educati	on IRA, in an account i	n a qualified ABLE progra	am, or under a qualified state tuition program.	
		529A(b), and 529(b)(1).	, , ,		
No					
Yes		Institution name	and description. Separately	r file the records of any interests.11 U.S.C. § 521(c):
			, , , , ,	,	7
		-			\$
			·		\$
					\$
25. Trusts,	equitable or fu	ture interests in proper	ty (other than anything lis	sted in line 1), and rights or powers	
	able for your b	enerit			
☑ №		STARTON CONTRACTOR OF THE PROPERTY OF THE PROP	- Control Control Fig. 17 () \$	Agent of the term of the second of the secon	
	Give specific	em.			S
111101	mation about ti	IGIII	The second second		3
26. Patents	, copyrights, t	rademarks, trade secret	s, and other intellectual p	property	
			oceeds from royalties and li		
No					
Yes.	Give specific		1 (M)(M)(1 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4		
infor	mation about th				\$
		According to the contract of t	ANTONE CALLANDA ANTONE	· · · · · · · · · · · · · · · · · · ·	
		and other general intan			
	es: Building per	mits, exclusive licenses, o	cooperative association hol	dings, liquor licenses, professional licenses	
☑ No		\$1000000000000000000000000000000000000	MAT 1000 control and all the later control and and all the later control and all the later contr		· · · · · · · · · · · · · · · · · · ·
	Give specific mation about the				
inior	mation about th	;	etten engan propagat philosoffeld e Terregan naggang kalang propagat page y en plant day en sy		\$
Money or n	roperty owed	to you?			
money or p	noperty owed	to you?			Current value of the portion you own?
					Do not deduct secured claims or exemptions.
-					Claims of exemptions.
	nds owed to y	ou			
☑ No	0				
☐ Yes.	Give specific in about them, inc	oluding whether		Federal:	\$
	you already file	ed the returns		State:	\$
	and the tax yea	ars		Local:	\$
		L	THE RESERVE OF THE STATE OF THE		
29. Family s	support				
		ump sum alimony, spous	al support, child support, m	naintenance, divorce settlement, property settleme	nt
🗹 No					
Yes.	Give specific in	formation	Annual Control of the		
				Alimony:	\$
		v a manager a		Maintenance:	\$
		and the second		Support:	\$
				Divorce settlement:	\$
			No America (As a construction of	Property settlement:	\$
30. Other ar	nounts someo	ne owes you			
Example	s: Unpaid wage	es, disability insurance pa	lyments, disability benefits, syou made to someone els	sick pay, vacation pay, workers' compensation,	
☑ No	Godiai Getti	ny benenia, unpaid idans	you made to someone els	C	
	Give specific in	formation			
_ 103.	Sire apcome III				* \$
		i			

Debtor 1	Yvette	Marie	Webb	Case number (if known) 16-51563	
	First Name	Middle Name	Last Name		
	sts in insurance	•			
		ibility, or life insurance	æ; health savings account (HSA)	credit, homeowner's, or renter's insurance	
☑ No					
☐ Yes		rance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy	and list its value		·	
					\$
					\$
					\$
			rom someone who has died		
propert	ty because some	ry of a living trust, ex sone has died.	spect proceeds from a life insuran	ce policy, or are currently entitled to receive	
☑ No	•				
		nformation			
 103	s. Give specific i	momation			\$
		Į.			
			not you have filed a lawsuit or	· •	
Examp	oles: Accidents, e	employment disputes	, insurance claims, or rights to su	ıe	
☑ No					
☐ Yes	s. Describe each	ı claim			
				MANAGE AT A STATE OF THE STATE	\$
34. Other o	contingent and	unliquidated claim	s of every nature, including cou	unterclaims of the debtor and rights	
	off claims			-	
☑ No					77.14
☐ Yes	s. Describe each	ı claim			
		L		P. CARONNOSARIANOSANOSANOSANOSANOSANOSANOSANOSANOSANOS	\$
35 Any fin	ancial accete v	ou did not already	liet		
☑ No		ou ara mor undady			
_	- Cius:E-:	-6	, , , , , , , , , , , , , , , , , , , ,		4
— 168	s. Give specific i	nformation			\$
36. Add the	e dollar value d	of all of your entries	from Part 4, including any ent	ries for pages you have attached	
for Par	t 4. Write that n	number here		→	s50.00
					<u> </u>
Down Co	l				
Part 5:	Describe A	Any Business-H	elated Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
37. Do vou	OWIT OF have a	ny legal or equitable	e interest in any business-relat	ted property?	
	Go to Part 6.	, logui oi oquitabi	o merest in any business-relat	to property:	
_	s. Go to line 38.				
L les	s. Go to line 36.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
38 Accoun	nts receivable o	or commissions you	ı already earned		
	re receivable 0	a commissions you	aneauy earneo		
☐ No			MI MANUSCHINI CONTROL I I I I I I I I I I I I I I I I I I I		
☐ Yes	s. Describe				e
	1.	· · · · · · · · · · · · · · · · · · ·	We specifically approximate the control of the cont	<u> </u>	\$
		nishings, and supp			
	es: Business-relate	d computers, software,	modems, printers, copiers, fax machin	nes, rugs, telephones, desks, chairs, electronic devices	
☐ No					
Yes	. Describe				\$
		The second of th	W 1 M W 1 W 1 W 1 W 1 W 1 W 1 W 1 W 1 W		<u> </u>

Debtor 1	Yvette First Name	Marie Marie La	W∋bb_	Case number (if known) 16-51563	·
	Lust Manie	made Name La	ist Name		
40. Machine	ery, fixtures, e	quipment, supplies ye	ou use in business, and tools	of your trade	
☐ No					
☐ Yes	. Describe		en annua manara manara a sa sa manara a sa		_
					\$
41. Invento	-				
□ No	•	COLUMN TO THE TOTAL COLUMN	TRANSPORTED AND CARROLS AND COMPANY OF THE PARTY OF THE P		
☐ Yes	. Describe				\$
	•	* P. C.	A TANA SECTION OF CONTRACT OF THE SECTION OF THE SE	•	
42. Interest	s in partnersh	ips or joint ventures			
☐ No					
🔲 Yes	. Describe	Name of entity:		% of ownership:	
		Hame of entity.			
				%	\$
					\$
				%	\$
43. Custom	er lists, mailir	ng lists, or other comp	ilations		
	Do your lists	include nersonally id	entifiable information (as defi	ned in 11 U.S.C. & 101/41A)\2	
00	□ No	moldae personany la	entinable information (as dem	1100 111 11 0.0.0. 3 10 1(4 17 1)):	
	Yes. Desc	riha	TO THE CONTRACTOR AND A PROPERTY OF THE CONTRACTOR OF THE CONTRACT		3
	Carres Desc	, IDE			\$
			THE CONTRACT OF THE CONTRACT O	A. WWW.	
	siness-related	property you did not	already list		
☐ No					
	. Give specific				S
Inioi	rmation				e
					<u>-</u>
					\$
					\$
					\$
					\$
				ies for pages you have attached	\$0.00
IOI Fait	. S. WHILE MALI	iumber nere		······································	
			Non-American Control of the Control		
Part 6:			nercial Fishing-Related Pr rmland, list it in Part 1.	operty You Own or Have an Interest I	n.
40 D					
	own or nave a Go to Part 7.	ny legal or equitable i	nterest in any farm- or comm	ercial fishing-related property?	
	Go to Part 7. Go to line 47.				
					Current value of the portion you own?
					Do not deduct secured claims
					or exemptions.
7. Farm ar		and the second			
	es: Livestock, p	oultry, farm-raised fish			
□ No		ar a year			
∟ Yes					
					\$

Debtor 1	Yvette	Marie	Webb		Case number (if known) 16-51563		
	First Name	Middle Name Last Name					
48. Crops-	either growing	or harvested					
□ No	_						
	s. Give specific					•	
	;					Φ	
49. Farm a		ment, implements, machi	•				
☐ Ye	s						
	and the second	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE				\$	
		ies, chemicals, and feed					
□ No □ Yes	S	,					
	, to the same of t					s	
51. Any fai	rm- and commer	cial fishing-related proper					
□ No		AAAAAATT Soot Aaaaan sa				eng.	
info	s. Give specific ormation					\$	
52. Add th	e dollar value of	all of your entries from P	art 6. including anv er	ntries for page	s vou have attached		0.00
		mber here			_	\$	
Part 7:	Describe A	ll Property You Own	or Have an Inter	rest in That	You Did Not List Above	•	
5							
-		perty of any kind you did a country club membership	not aiready list?				
Ø No	ļ			ere alane, e proportion de la colonia de la	The second of th	s	
	s. Give specific					\$	
	:				4	s	
				e on the second			0.00
54. Add th	e dollar value of	all of your entries from Pa	art 7. Write that numb	er here		\$	0.00
Part 8:	List the To	tals of Each Part of	this Form				
55. Part 1:	Total real estate	, line 2				\$	0.00
56 Part 2:	Total vehicles, li	ne 5	s	0.00)		
		nd household items, line		3,800.00)		
	·	·	• • • • • • • • • • • • • • • • • • •	50.00	_)		
	Total financial a		\$	0.00	_		
		elated property, line 45	\$	0.00	-		
60. Part 6:	Total farm- and	fishing-related property, I	ine 52 \$		_		
61. Part 7:	Total other prop	erty not listed, line 54	+s	0.00	_		
62. Total p	ersonal property	. Add lines 56 through 61.	ss	3,850.00	Copy personal property total =	→ +\$	3,850.00
			\$ 11 11 11 11 11 11 11 11 11 11 11 11 11				
63. Total o	f all property on	Schedule A/B. Add line 55	+ line 62			s	3,850.00

Fill in this in	formation to id	entify your case:		
Debtor 1	Yvette	Marie	Webb	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
First Name Middl Debtor 2		for the: Eastern District of N	/lichigan	
Case number	16-51563			
(If known)				

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:

Identify the Property You Claim as Exempt

1.	Which set of ex	kemptions are you claiming?	Check one only, even it	f your spouse is filing with you.	
		iming state and federal nonbant iming federal exemptions. 11 U		U.S.C. § 522(b)(3)	
2.	For any proper	ty you list on <i>Schedule A/B</i> tl	hat you claim as exem	pt, fill in the information below.	
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	Furniture	\$ <u>2,000.00</u>	□ s	11 U.S.C. 522(d)(3)
	Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit	
	Brief description:	Electronics	\$ <u>1,000.00</u>	□ s	11 U.S.C. 522(d)(3)
	Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit	
	Brief description:	Clothing	\$800.00	□ s	11 U.S.C. 522(d)(3)
	Line from Schedule A/B;			100% of fair market value, up to any applicable statutory limit	
3.		ng a homestead exemption o		es filed on or after the date of adjustment.	
	Mo	ouncile on 470 1715 and every 5	years after that for case	is filed on or after the date of adjustment.	,
		u acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	□ No				
	☐ Yes				

Part 2:

Additional Page

Brief description Schedule A	on of the property and line //B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Cash on hand	s50.00	□ \$	11 U.S.C. 522(d)(5)
Line from Schedule A/B:	<u>16</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	[] \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your ca	se:				
Debtor 1 Yvette Marie	e Webb				
	Name Last Name				
	Name Lasi Name				
United States Bankruptcy Court for the: Eastern	District of Michigan				
Case number (if known)				☐ Check	if this is an
					ed filing
Official Form 106D					
	rs Who Have Claims So	ecure	ed by Prop	ertv	12/15
	e. If two married people are filing together, b				
information. If more space is needed, co additional pages, write your name and ca	by the Additional Page, fill it out, number the	entries,	and attach it to this	form. On the top of	any
additional pages, write your name and ca	ise number (ii known).				
1. Do any creditors have claims secured					
No. Check this box and submit this for Yes. Fill in all of the information below	rm to the court with your other schedules. You i	have nothi	ng else to report on t	his form.	
	•				
Part 11 List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor s	enarately	Column A	Column B	Column C
for each claim. If more than one creditor	has a particular claim, list the other creditors in	Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	habetical order according to the creditor's name	e.	value of collateral.	claim	If any
Fortis Auto Finance	Describe the property that secures the claim	n:	s7,442.33	s7,442.33	\$
Creditor's Name P O. Box 98	2009 Chevy Impala				
Number Street		W. Flat. 4 . 1 . 4			
	As of the date you file, the claim is: Check at Contingent	I that apply.			
Warren, MI 48090	Unliquidated				
City State ZIP Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage of	r secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lie	n)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a	Other (including a right to offset)		-		
community debt Date debt was incurred 04/16/2013		2 4			
7.0	Last 4 digits of account number 9 7 6		s 42,514.40	s 42,514.40	
Family Manufactured Homes Creditor's Name	Describe the property that secures the claim	n:	\$ <u>42,514.40</u>	\$ 42,514.40	\$
P.O. Box 483	Manufactured Homes				
Number Street	As of the date you file, the claim is: Check all	that apply			
	Contingent	tilat apply.			
Ortonville, MI 48462 City State ZIP Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply.				
Debtor 2 only	An agreement you made (such as mortgage o car loan)	r secured			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lier	n)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
Check if this claim relates to a community debt	— Ones (molously a signit to onset)				
Date debt was incurred	Last 4 digits of account number 2 1	1 1			
Add the dollar value of your entries in	Column A on this page. Write that number h	nere:	\$ 49, 956.73		***************************************
16-51563-pjs Doc 1	.4 Filed 08/31/16 Entered 08	3/31/16	'12:33:05 P	age 15 of 45	

Schedule D: Creditors Who Have Claims Secured by Property

Official Form 106D

Fill	this in	formation to Iden	itify your case:						
		Yvette	Marie	Webb					
Debt	or 1	First Name	Middle Name	Last Name					
Debt (Spor	or 2 use, if filing)	First Name	Middle Name	Last Name					
Unite	ed States	Bankruptcy Court for	the: Eastern District o	f Michigan					
	number	16-51563							k if this is an ided filing
		Form 106E				1.01-:			
Sc	hed	ule E/F: C	reditors V	/ho Have Ur	isecui	red Clain	15		12/15
List t A/B: credi need	he other Property tors with ed, copy additiona	party to any exect (Official Form 10 partially secured the Part you nee all pages, write you	cutory contracts or u)6A/B) and on <i>Sched</i> d claims that are list		uld result in acts and Un tors Who Ha	n a claim. Also li: lexpired Leases (l ave Claims Secur	st executory co Official Form 10 <i>ed by Property</i>	intracts on So 36G). Do not i . If more spac	include any ie is
3	557 ·								
_		editors have prio o to Part 2.	rity unsecured claim	s against you?					
	Yes.	o to Fait 2.							
: 2	ist all of	your priority uns	secured claims. If a c	reditor has more than one	priority uns	ecured claim, list t	he creditor sepa	rately for each	claim. For
n.	oppriority	amounts As muc	th as possible, list the	a claim has both priority claims in alphabetical ord	er according	a to the creditor's n	ame. If you have	e more than tv	vo priority
u	nsecured	d claims, fill out the	Continuation Page of	Part 1. If more than one	creditor hold	ls a particular clain	n, list the other o	reditors in Par	t 3.
· (F	For an ex	cplanation of each	type of claim, see the	instructions for this form i	n (ne instruc	tion booklet.)	Total claim	Priority	Nonpriority
								amount	amount
2.1				Last 4 digits of accou	nt number		s	s	_ \$
-	Prority Cre	editor's Name		<u>-</u>	_				
	Number	Street		When was the debt in	curieur _				
				As of the date you file	, the claim is	s: Check all that appl	y.		
	City		State ZIP Code	Contingent					
	•	urred the debt? Ch		Unliquidated					
	U Debte		ieck one.	☐ Disputed					
	☐ Debte			Type of PRIORITY u	nsecured cl	aim:			
		or 1 and Debtor 2 only	у	Domestic support of					
	☐ At lea	ast one of the debtors	and another	• • • • • • • • • • • • • • • • • • • •	_	owe the government			
	Chec	ck if this claim is fo	or a community debt	Claims for death or p					
	is the cl	aim subject to offs	et?	intoxicated					
	П мо			Other. Specify			-		
	☐ Yes	ACCO MAN	The contract of the first contract of the cont	MARKAGO NATIONAL CONTRACTOR OF THE STATE OF	****	and the second			
2.2				Last 4 digits of accou	nt number _		\$	_ \$	\$
	Priority Cri	editor's Name		When was the debt in	curred?				
	Number	Street		- As of the date you file	the claim i	s: Check all that app	lv		
				Contingent	.,	o. Chook on that app	••		
	Čey		State ZIP Code	Unliquidated					
	•	curred the debt? C		Disputed					
		or 1 only	neen one.	T of DDIODITY		laim			
		or 2 only		Type of PRIORITY u		ıaıIII.			
	☐ Debt	or 1 and Debtor 2 onl	ly	☐ Domestic support of ☐ Taxes and certain o		owe the governmen	•		
		ast one of the debtors		Claims for death or	•	~	•		
	☐ Che	ck if this claim is f	or a community debt	intoxicated	personiai injuly	, while you were			
T T T T T T T T T T T T T T T T T T T	Is the c ∐ No	laim subject to offs	set?	Other. Specify			_		
	☐ Yes	5 E1E62 nic	Doc 14 File	ad 08/31/16 En	tarad 00	/21/16 12:22	POE Book	16 of 45	

page 1 of ____

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Case number (if known) 16-51563

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List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you' No. You have nothing to report in this part. Submit this form to the Yes			
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, licelaims fill out the Continuation Page of Part 2.	For each claim listed, identify what type of claim it is. Do not i	iist ciaims aireau	y ed
			Total claim	
1.1	35th District Court Nonpriority Creditor's Name	Last 4 digits of account number 8 9 7 7 When was the debt incurred? 07/28/2016	ş318.	00
	660 Plymouth Road	When was the debt incurred? U1720/2010		
	Plymouth, MI 48170 Coy State ZIP Coce	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		;
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ☑ No ☑ Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Trafffic ticket		
4.2	Nenpriority Creditor's Name	Last 4 digits of account number $\frac{8}{07/03/2004} = \frac{7}{07/03/2004}$	\$3,000	.00
	29733 Gratiot Ave. Number Street Roseville, MI 48066	As of the date you file, the claim is: Check all that apply		
	City State ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one. ☑ Debtor 1 only	☐ Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Attorney fees	S	
	¼ No ∐ Yes	STREET HAND TO STORY STORY STORY STREET STRE	n i s ghaighta a thigh th' ha ghh tha an aidine aid a bha a' bha a' bha	
4.3	ADT Numpriority Creditor's Name 1501 Yamato Road	Last 4 digits of account number 8 9 7 7 When was the debt incurred? 02/02/2012	s950	0.00
	Number Street Boca Roca, FL 33431 Gray State ZIP Code	- As of the date you file, the claim is: Check all that apply.	,	
	Who incurred the debt? Check one. ↓ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed☐		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other. Specify Alarm system	is -	
_	U Yes — 16-51563-nis Doc 1/1 Filed 08/31/16	Entered 08/31/16 12:33:05 Page 17 of	F 115	

Yvette

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Case number (if known) 16-51563



listing any entries on this page, numb	per them beginning with	1 4.4, followed by 4.5, and so forth.	Total cla
		Last 4 digits of account number 8 9 7 7	0.40
Asset Acceptance, LLC		Last 4 digits of account number 0 0 1 1	\$ <u>3,407</u>
Respirately Creditor's Name 28 405 Van Dyke Ave.		When was the debt incurred? 05/28/2009	
lumber Street	ЛI 48093	 As of the date you file, the claim is: Check all that apply. 	
	ale ZIP Code	Contingent	
		Unliquidated	
Vho incurred the debt? Check one.		☐ Disputed	
Debtor 1 only		Tugo of NONDRIGHTY unacquired claims	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
□ Debtor Fand Debtor 2 only □ At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community	y debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?		Other Specify Civil judgment	
xÍ No			
_l Yes	nde e Alexandria di State de La Companya de La Com La Companya di State de La Companya	UHINTINIA	ing parage carrangers of miground tomos
AT &T		Last 4 digits of account number 8 9 7 7	\$ 2,077
Nonpriority Creditor's Name	<u> </u>	When was the debt incurred? 12/02/2015	
P O. Box 5014			
Carol Stream,	L 60197	As of the date you file, the claim is: Check all that apply.	
·	ale ZIP Code	Contingent	
Attaches and the debto of		Unliquidated	
Who incurred the debt? Check one.		☐ Disputed	
√ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Student loans	
☐ At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that 	
_! Check if this claim is for a communit	v deht	you did not report as priority claims	
	y ugut	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?		✓ Other. Specify <u>Utility</u>	
x [⊆] No ∟JYes			
A T9 T I bross	udert den 1984 in 1880 indeklindeligenheideligklich von die in 1 in Gerent fan de indeklind de indeklindelige	Last 4 digits of account number 8 9 7 7	\$ <u>423</u>
AT&T Uverse Apriority Creditor's Name			
P O. Box 5014		When was the debt incurred? 12/15/2015	
Aumber Street	L 60197	As of the date you file, the claim is: Check all that apply.	
Only Si	late ZIP Code	Contingent	
Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
√ Debtor 1 only		☐ Disputed	
☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
∠ Check if this claim is for a communit	y debt	you did not report as priority claims	
is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cable/cell	
M No		Outer: Specify Oddiesoon	
Li Yes			

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Webb

Case number (if known) 16-51563



er listing any entries on this page, no	umber thei	n beginning with	4.4, followed by 4.5, and so forth.	To	tal claim
ComenityBank/Meijer, Inc.			Last 4 digits of account number 8 9 7 7	s	510.0
P.O. Box 182789	Descriptoreditor's Name Descri		When was the debt incurred? 12/01/2015		
Number Street Columbus,	OH	43218	As of the date you file, the claim is: Check all that apply.		
C ₍₁₎			Contingent Unliquidated		
Who incurred the debt? Check one.			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	unity debt		Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offset?			Other Specify Charge account		
☐ Yes					
DTF Energy	idespablished ye ve se et er yyder şa	arandandan ing 9 min ping 1933 89 ₄ manggalan dad	Last 4 digits of account number 0 0 3 9	\$	930.4
Nonpriority Creditor's Name			When was the debt incurred? 02/12/2014		
P.O. Box 740786			-		
Cincinnati,	ОН	45274	As of the date you file, the claim is: Check all that apply.		
Cit /	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
☑ Debtor 1 only			_ 535500		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and another	r		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	unity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utility		
✓ No ☐ Yes			other: Specify Others		
	المراجعة الم	y ye damana yana a a a a a a a a a a a a a a a a	Last 4 digits of account number 2 1 1 1	s_4	2,514.
Necessarily Manufactured Homes Necessarily Creditor's Name					
P.O. Box 483			When was the debt incurred? $02/03/2014$		
Number Street Ortonville,	MI	48462	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
₩ Debtor 1 only			— Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	er		Student loans		
_			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset?	y ucut		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Manufactured home		
✓ No ☐ Yes			uner. Specify ividificationed frome		

Yvette

Marie

Webb

_m 16-51563 Case number (if know



FED Loan Servicing			Last 4 digits of account number 8 9 7 7	_{\$} 11,29
Nonpriority Creditor's Name P.O. Box 60610			When was the debt incurred? 06/10/2013	
Number Street	D.4	47400	 As of the date you file, the claim is: Check all that apply. 	
Harrisburg,	PA State	17106 ZIP Code	Contingent	
On,	Viais	2 0000	Unliquidated	
Who incurred the debt? Check	one.		Disputed	
Debtor 1 only			·	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☑ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
\square Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
₩ No				
∐ Yes				
Fortis Auto Finance	ett 97/100 v.C.O. ett i 3 ett 3 ett dubteren minde proven en ett von inni-	Albert og sperif i menne en stade didatelligen.	Last 4 digits of account number 8 9 7 7	s 7,44
Nonpriority Creditor's Name	*******			
21532 Van Dyke Ave.			When was the debt incurred? 04/16/2013	
Number Street			As of the date you file, the claim is: Check all that apply.	
Warren, MI 48089	6:	710.0-4-		
Guy	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check	one.		Disputed .	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	d another		lacktriangle Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Auto Ioan	
₩ No			- Office Opening 1 taxo 10011	
☐ Yes				
KIA Motor Finance	kalara u iron minunga dharafaa kanajaa hiimpin iyo 150 (ii) x51M jada aan	alitens a usuaribien (1 in) poper praeme morp inacipações mort	Last 4 digits of account number 8 9 7 7	_{\$_} 20,95
Na apriority Creditor's Name			When was the debt incurred? 11/10/2015	
P O. Box 20835			- As of the data was file the children as	
Fountain Valley,	CA	92728	As of the date you file, the claim is: Check all that apply.	
Спу	State	ZIP Code	Contingent	
Who incurred the debt? Check	cone.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	d another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other Specify Auto Ioan	
No			Other. Specify Auto loan	
WELL IND				

Marie

Webb

Case number (if known) 16-51563



listing any entries on this page,	number the	em beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
Kirby Vacuum			Last 4 digits of account number 6 1 1 8	s <u>400.0</u>
Nemptiority Creditor's Name 1920 W. 114th Street			When was the debt incurred? 11/12/2015	
Number Street Cleveland,	ОН	44102	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
 □ Debtor 1 and Debtor 2 only □ At least one of the debtors and anoth 			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a comm	nunity debt		Debts to pension or profit-sharing plans, and other similar debts	
ls the claim subject to offset? ☑ No			Other Specify Installment account	
L) Yes	Completent Array Chine	romanna menananananan eri il 1955 kilologistassa k	differences.	r 12. ar (Mark Endrig) brigh é pous répais répais mais na mhair
Office of Child Support			Last 4 digits of account number 6 8 4 9	s <u>15,000.</u>
P.O. Box 30744			When was the debt incurred? 11/19/2015	
Vanber Street Lansing,	MI	48909	As of the date you file, the claim is: Check all that apply.	
5-y	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated Disputed	
Debtor 1 only			u disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and anoth	ier		Student loans	
Check if this claim is for a comr			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	numey debt		Debts to pension or profit-sharing plans, and other similar debts	
S ine claim subject to onset? Sci No			Other Specify Child support	
Li Yes	/ windows##www.chielp.edura.ch			up ou source makes our or or moderate
Sierre Haught C/O Goren, G	oren & H	arris, PC	Last 4 digits of account number 8 9 7 7	\$
30400 Telegraph Rd., Ste. 4	70		When was the debt incurred? 11/15/2015	
Number Street Bingham Farms,	—- МI	48025	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only			→ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and anoth	er		☐ Student loans	
Check if this claim is for a comm			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	iumity debt		Debts to pension or profit-sharing plans, and other similar debts	
ls the claim subject to offset?			Other Specify Auto accident	
Yes				

Yvette

te 1

Marie

Webb

Case number (if known)_16-51563



usting any entries on this page,	number the	em beginning witl	h 4.4, followed by 4.5, and so forth.	Total claim
Sirius XM Radio			Last 4 digits of account number 8 3 3 6	s200.0
P.O. Box 9001399		-	When was the debt incurred? 11/20/2015	
Louisville,	KY	40290	As of the date you file, the claim is: Check all that apply.	
y	State	ZIP Code	Contingent	
ho incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
☐ At least one of the debtors and anot	her		 Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a com	nunity debt		you did not report as priority claims	
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Sirius radio	
Á No			Curer. Specify Office Factor	
l Yes				
SYNCB/Walmart		 **Control of property and a service of the control of	Last 4 digits of account number 8 9 7 7	s <u>329.0</u>
enpriority Creditor's Name			When was the debt incurred? 11/10/2015	
O. Box 965029			- When was the debt incurred?	
Orlando,	FL	32896	As of the date you file, the claim is: Check all that apply.	
у	State	ZIP Code	Contingent	
ho incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and anoth	ner		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a comr	nunity debt		you did not report as priority claims	
the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge account	
Á No			Giller. Specify Charge account	
J Yes				
J of M Credit Union			Last 4 digits of account number 8 9 7 7	s_13,560.Q
apriority Creditor's Name		- 1-1-1-1	When was the debt incurred? 10/03/2014	
O. Box 7850				
Ann Arbor,	Mi	48107	As of the date you file, the claim is: Check all that apply.	
d y	State	ZIP Code	Contingent	
Vho incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and anoth	er		 Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a comm	nunity debt		you did not report as priority claims	
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Auto Ioan	
Á No			other, Specify Auto to all	
l Yes				

Marie

Webb

_m 16-51563 Case number (if know



Afte	r listing any entries on this page, num	ber the	m beginning with	1 4.4, followed by 4.5, and so forth.	Total claim
4.19	U of M Credit Union			Last 4 digits of account number 8 9 7 7	s 4,560.00
	Numpriority Creditor's Name P.O. Box 7850		n	When was the debt incurred? $08/01/2014$	
	Number Street	N A I	49107	As of the date you file, the claim is: Check all that apply.	
		MI tate	48107 ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only			☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another			 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that 	:
	☐ Check if this claim is for a communit Is the claim subject to offset? ☐ No ☐ Yes	y debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card	
4. 20	W. Village Estates	dad comments of Synthesis	#В тэйхээрийх эт т т 450-ыргында аййй г	Last 4 digits of account number 8 9 7 7	s_1,000.00
	Nenpriority Creditor's Name			When was the debt incurred? 01/28/2016	:
	7040 Shawnee	_			
	Romulus,	MI	48174	As of the date you file, the claim is: Check all that apply.	
	Coy	tate	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			Disputed	
	Debtor 1 only			~ (1010000000000000000000000000000000000	-
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another			Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a communit	y debt		you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Lot lease	
	∐ No ∐ Yes				
4,4	Oakwood Hospital	Mai chaile a tha fireach	porthy yang and color about to the high camera recommended by the color	Last 4 digits of account number 7751	\$ <u>4,598.0</u>
	Numpriority Creditor's Name				
	18101 Oakwook Blvd.			-	
		MI	48124	As of the date you file, the claim is: Check all that apply.	
	City	tate	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a communit	y debt		you did not report as priority claims	
	Is the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Medical</u> 	
	X No □ Yes				

Marie

Case number (if known) 16-51563



List Others to Be Notified About a Debt That You Already Listed

Elizabeth Smith, Esq.			On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 2003			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber Street			☑ Part 2: Creditors with Nonpriority Unsecured Clair
Varren,	MI	48090 ZIP Code	Last 4 digits of account number 0 7 9 6
34th District Court	The state of the s		On which entry in Part 1 or Part 2 did you list the original creditor?
11131 Wayne Road			Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 42 Part 2: Creditors with Nonpriority Unsecured
			Claims
R omulus,	MI State	48174 ZIP Code	Last 4 digits of account number 0 7 6 9
Franklin Coll. SVS			On which entry in Part 1 or Part 2 did you list the original creditor?
2978 W. Jackson Stree	t	·-	Line <u>4.5</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
Tupelo,	MS State	38803 ZIP Code	Last 4 digits of account number 8 9 7 7
C Systems Collections			On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 64378			Line <u>4.6</u> of (<i>Check one</i>): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured
			Claims
Saint Paul,	MN	55164 ZIP Code	Last 4 digits of account number 8 9 7 7
Firstline Financial, Inc.	c ,;(C ,	- Care and C	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 895			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
. mbor Street			Part 2: Creditors with Nonpriority Unsecured Claims
Great Falls,	VA State	22066 ZIP Code	Last 4 digits of account number 8 9 7 7
he Leduc Group	un 😑 i i i i i i i i i i i i i i i i i i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 2191			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Royal Oak,	MI State	48068 ŽIP Code	Claims Last 4 digits of account number 3 7 7 3
Weber J. Olecese, PC			On which entry in Part 1 or Part 2 did you list the original creditor?
3250 W. Big Beaver Rd	., Ste. 124		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims 2 Part 2: Creditors with Nonpriority Unsecured
			Claims
Troy,	MI	48084	5 1 8 6

Last 4 digits of account number 5 1 8 6



Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 6a. 0.00
- 6b. 0.00
- 6c. 0.00
- 0.00
- 6e. 0.00

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f. 11,299.00
- 6g.
- 0.00 6h.

0.00

- 146,138.42
- 1,527,437.42

page __ of _

Debtor	Yvette	Marie	Webb	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Last Name	
	Bankruntev Court fo	or the: Eastern District of	Michigan	
United States	Dankiupicy Count ic			
United States	16-51563			

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - 🗹 Yes, Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1	Fortis Auto Financ	e		Manufactured Home	
	Name				
	P.O. Box 98				
	Number Street				
	Warren,	MI	48090		
	City	State	ZIP Code		
2.2	Family Manufactu	red Homes			
	Name				
	P.O. Box 483				
	Number Street	•			
	Ortonville,	MI	48462		
300.7	City	State	ZIP Code		
2.3	- A				
					
-	Manue				

1	Number Street				
	17.00	State	ZIP Code		
	City	State	ZIP Code	galaxia () () () () () () () () () (graphic and the second of the
2.4					
	Name				
	Hamber Street				
	City	State	ZIP Code	***	a war a see a saara a saara ah saara a
2.5					
	Name				
	Name				
	N. moer Street				
	• • • • • • • • • • • • • •				
	-2.7	State	ZIP Code		
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Debtor 1	Yvette	Marie	Webb	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States		r the: Eastern District of	Michigan	
	16-51563			
Case number	10-31303			

Official Form 106H

☐ Check if this is an amended filing

Sc	hedule H: Your Co	odebtors			12/15
are fil and n	ing together, both are equally resp	onsible for supplying the left. Attach the Ad	correct information. I	e as complete and accurate as possible. If two m f more space is needed, copy the Additional Pag page. On the top of any Additional Pages, write you	e, fill it out,
į (o you have any codebtors? (If you a ☐ No	are filing a joint case, d	o not list either spouse	as a codebtor.)	ennami ekon bir i ili iki ke ibahi
6	∕a∕ Yes				
	Vithin the last 8 years, have you live Arizona, California, Idaho, Louisiana, I		-	y? (Community property states and territories includes shington, and Wisconsin.)	de
	No. Go to line 3.				
L	Yes. Did your spouse, former spou	ise, or legal equivalent	live with you at the time	a?	
•	□ No□ Yes. In which community state	or territory did you live	?	Fill in the name and current address of that perso	on.
			*****	_	
	Name of your spouse, former spouse, or	or legal equivalent			
	Number Street			_	
	City	State	ZIP Code	_	
	Schedule E/F, or Schedule G to fill of Column 1: Your codebtor	-	om 106E/F), or Sched	dule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you ow	e the debt
				Check all schedules that apply:	
3.1	Cian Faces (Danasas)			Should all surface and apply.	
لتت	Glen Eason (Deceased)			Schedule D, line 2.1	
	6942 Canyon Drive			Schedule E/F, line 4.9	
	Number Street Romulus.	MI	48174	Schedule G, line 2.1	
	City	State	ZIP Code		
3.2	Glen Eason (Desceased)			Effects to Date 200	
	Name			Schedule D, line 2.0	
	6942 Canyon Drive			✓ Schedule E/F, line <u>4.9</u> ✓ Schedule G, line <u>2.2</u>	
	Romulus,	MI State	48174 ZIP Code	Scriedule G, line <u>7.7</u>	
3.3	City	State	ZIP Code		
	Name			Schedule D, line	
				☐ Schedule E/F, line	
	Number Street			☐ Schedule G, line	
į	Number Street City	State	ZIP Code	☐ Schedule G, line	

Official Form 106H

Schedule H: Your Codebtors

page 1 of <u>1</u>

Fill in this in	formation to Identify	your case:			1		
Debtor 1	Yvette	Marie V	Vebb				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)		Middle Name	Last Name				
United States		Eastern District of Michigar	1				
Case number (If known)	16-51563	·			Check if		
			······································		-	mended filing oplement showing postp	etition chapter 13
						ne as of the following da	
Official Fo					MM /	DD / YYYY	
Sched	lule I: You	r Income					12/15
supplying co- if you are sep separate shee	rrect information. If your parated and your spou	ou are married and not fil se is not filing with you, top of any additional pag	ing jointly, and yo do not include inf	ur spouse ormation	e is living with about your sp	tor 2), both are equally re you, include information ouse. If more space is ne known). Answer every qu	about your spouse eded, attach a
Fill in you information	r employment on.		Debtor 1			Debtor 2 or non-fili	ng spouse
attach a se	e more than one job, eparate page with n about additional	Employment status	☑ Employed	ed		☐ Employed ☐ Not employed	
Include pa self-emplo	rt-time, seasonal, or yed work.	Occupation	Maintance				
	n may include student aker, if it applies.	Occupation				-	
		Employer's name	Walmart			<u> </u>	
		Employer's address	702 SW 8th S Number Street	Street		Number Street	
			Bentonville,	AK	72716		
			City		ZIP Code	•	State ZIP Code
		How long employed the	re? 10 months	5		10 months	
Part 2:	Give Details About	Monthly Income					
	monthly income as of less you are separated	-	n. If you have nothi	ing to repo	rt for any line,	write \$0 in the space. Includ	de your non-filing
If you or you below. If you	our non-filing spouse ha ou need more space, a	ave more than one employe ttach a separate sheet to the	er, combine the info nis form.	rmation fo	r all employers	for that person on the lines	;
					For Debtor 1	For Debtor 2 or non-filing spouse	
List mon deduction	thly gross wages, sales). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll v wage would be.	2. \$	1,197.00	\$	
3. Estimate	and list monthly over	time pay.		3. +\$	0.00	+ \$	
4. Calculate	gross income. Add li	ne 2 + line 3.		4. \$	1,197.00	\$	

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page 1

9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	592.20		\$		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,654.87	+	\$		=
11.	State all other regular contributions to the expenses that you list in Sched	ule J						
	Include contributions from an unmarried partner, members of your household, you friends or relatives.	our d	epend	lents, your ro	omn	nates, and other		
	Do not include any amounts already included in lines 2-10 or amounts that are r	not av	ailabl	e to pay expe	nse	s listed in Schedu	le J.	
	Specify: Food stamps YMW						11.	+
12.	Add the amount in the last column of line 10 to the amount in line 11. The					•		
	Write that amount on the Summary of Your Assets and Liabilities and Certain St	tatisti	cal Ini	formation, if it	арр	ltes	12.	
13	B. Do you expect an increase or decrease within the year after you file this fo	orm?		_				

0.00

1,654.87

Combined monthly income

page 2

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Official Form 106I Schedule I: Your Income

Yes. Explain:

Fill in this	information to iden	ntify your case:					
Debtor 1	Yvette	Marie	Webb				
	First Name	Middle Name	Last Name	Check if			
Debtor 2 (Spouse, if filir	g) First Name	Middle Name	Last Name		mended f	-	
United State	s Bankruptcy Court for	the: Eastern District of	Michigan			snowing post of the following	petition chapter 13 date:
Case number	r 16-51563				DD / YYYY		
(If known)							
	Form 106J						
Sche	dule J: Y	our Expe	nses				12/15
information		eeded, attach anothe		ng together, both are equally . On the top of any additiona			
Part 1:	Describe Your	Household					
1. Is this a j	oint case?						
	So to line 2. Does Debtor 2 live i	n a separate househo	old?				
C	□ No	·		eparate Household of Debtor	2.		
		100 mm m m m m m m m m m m m m m m m m m			- .		
Do not list	ave dependents? Debtor 1 and		this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	ate the dependents'	each depen	dent			* Appropriate Control of the Control	□ No □ Yes
names.							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No □ Yes
							□ No
							Yes
expenses yourself	expenses include s of people other th and your dependen	its? U Yes					
Part 2:	Estimate Your O	ngoing Monthly Ex	penses				
-	s of a date after the		-	re using this form as a suppental Schedule J, check the			
Include exp	enses paid for with	non-cash governme	nt assistance if you	know the value of			
such assist	ance and have incl	uded it on Schedule i	: Your Income (Offi	cial Form 106l.)		Your expe	nses
	al or home owners for the ground or lot	•	r residence. Include	first mortgage payments and	4.	\$	733.33
If not in	cluded in line 4:						
4a. Re	al estate taxes				4a .	\$	0.00
4b. Pro	perty, homeowner's	, or renter's insurance			4 b.	\$	0.00
4c. Ho	me maintenance, rep	pair, and upkeep exper	nses		4c.	\$	100.00
4d. Ho	meowner's associati	on or condominium du	es		4d.	\$	0.00

Yvette Marie Webb Case number (it known) 16-51563

Debtor 1

Your expenses 0.00 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 95.00 Electricity, heat, natural gas 6a. 6a 30.00 Water, sewer, garbage collection 6b. 250.00 Telephone, cell phone, Internet, satellite, and cable services 6c 0.00 6d Other. Specify: 6d 500.00 7. Food and housekeeping supplies 7. 0.00 Childcare and children's education costs 30.00 Clothing, laundry, and dry cleaning 100.00 Personal care products and services 10. 10 0.00 Medical and dental expenses 11 Transportation. Include gas, maintenance, bus or train fare. 150.00 Do not include car payments. 12 0.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. 0.00 Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. Life insurance 15a. 0.00 15b. Health insurance 15b. 237.00 15c. Vehicle insurance 15c. 0.00 15d. Other insurance. Specify: 15d Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. 0.00 Specify: 16 17. Installment or lease payments: 335.00 17a. Car payments for Vehicle 1 17a. 0.00 17b. Car payments for Vehicle 2 17b. 0.00 17c. Other, Specify: 0.00 17d. Other. Specify: Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 0.00 19. Other payments you make to support others who do not live with you. 0.00 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a. Mortgages on other property 20a. 0.00 20b. Real estate taxes 20h 0.00 20c. Property, homeowner's, or renter's insurance 20c 0.00 20d. Maintenance, repair, and upkeep expenses 20d. 0.00 20e. Homeowner's association or condominium dues 20e.

Det	otor 1	Yvette	Marie Middle Name Last Na	Webb	Case number (if known) 16	-51563	
21.	Oth					+\$	0.00
22.	Calc	ulate your monti	hly expenses.				A STATE OF THE STA
	22a.	Add lines 4 through	gh 21.		22a .	\$	1,654.87
	22b.	Copy line 22 (mo	nthly expenses for Debtor	2), if any, from Official Form	n 106J-2 22b.	\$	0.00
	22c.	Add line 22a and	22b. The result is your mo	onthly expenses.	22c .	\$	1,654.87
23.	Calcu	ulate your month	ly net income.				4 654 97
2	23a.	Copy line 12 (you	ur combined monthly inco	me) from Schedule I.	23a .	\$	1,654.87
2	23b.	Copy your month	nly expenses from line 220	above.	23b.	-\$	2,560.33
2	23c.	-	onthly expenses from your r monthly net income.	monthly income.	23c.	\$	-905.46
1	For e	xample, do you ex gage payment to in	xpect to finish paying for y ncrease or decrease beca	or expenses within the year our car loan within the year use of a modification to the	or do you expect your		

Fill in this in	nformation to ide	entify your case:			
Debtor 1	Yvette First Name	Marie Middle Name	Webb Last Name		
Debtor 2 (Spouse, if filing		Middle Name	Last Name	_	
United States	Bankruptcy Court f	or the: Eastern District of	Michigan		
	16-51563		<u></u>		
(If known)					Check if this is an amended filing
- ee: ·	40	200			
	al Form 10		Individual	Debtor's Schedules	12/15
		· · · · · · · · · · · · · · · · · · ·			
				supplying correct information. ded schedules. Making a false statement, concealing	
:	Sign Below				
		to pay someone who is	NOT an attorney to help	you fill out bankruptcy forms?	
☑ No □ Ye	o es. Name of perso	ın		. Attach Bankruptcy Petition Preparer's Notice, Declaration	n, and
				Signature (Official Form 119).	
	r penalty of perj hey are true and	l - k	read the summary and s	schedules filed with this declaration and	
★	ture of Debtor 1	Judl	Signature of De	ebtor 2	
	8-31-1 MM/ DD / YM	P	Date	/ YYYY	

Debtor 1	Yvette	Marie	Webb	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the: Eastern District of N	Michigan	
Case number	16-5 1563			
(If known)				

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

-	
للتكان	
	75.3

Give Details About Your Marital Status and Where You Lived Before

	☐ Married ☐ Not married			
?	During the last 3 years, have you lived anyw	here other than where y	ou live now?	
	Yes. 1 st all of the places you lived in the la	st 3 years. Do not include	where you live now.	
	Det.or 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
			☐ Same as Debtor 1	Same as Debtor 1
	Street	From To	Number Street	From To
	C1: State ZIP Cod	le .	City State ZIP Code	-
			Same as Debtor 1	Same as Debtor 1
	Number Street	From To	Number Street	From
	Cate State ZIP Cod	le .	City State ZIP Code	

Explain the Sources of Your Income

Yvette I. № Name

Did your have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are taking a joint case and you have income that you receive together, list it only once under Debtor 1.
Yes just in the details.

·	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	s9,362.62	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For first calendar year: (the vary 1 to December 31,2015 YYYY	 ✓ Wages, commissions, bonuses, tips) □ Operating a business 	s3,757.80	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Can sary 1 to December 31, 2014	 Wages, commissions, bonuses, tips) □ Operating a business 	s0.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$

5. Did y_{obs} are given any other income during this year or the two previous calendar years? me regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, ant, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and o lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Ŭ Na Ŭ Y

Yes on the details.	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
the te you filed for bankruptcy:	Disability SSI	\$ 2,528.00 \$ 1,169.60 \$		- s
For fast calendar year: /// december 31, 2015 YYYY	Disability SSI	\$ 3,757.50 \$ 5,196.00 \$		- \$ - \$ - \$
For the calendar year before that: (Jaccary 1 to December 31, 2014)	Disability SSI	\$\$,196.00 \$\$,196.00 \$		\$ _ \$ _ \$

,

List Certain Payments You Made Before You Filed for Bankruptcy

VVebb

No. 41.	ither Debtor 1 no	or Debtor 2 has primarily idual primarily	y consumer de onal, family, or h	bts. Consumer debts ar ousehold purpose."	e defined in 11 U.S.C. § 101	(8) as
		efore you filed for bankru			\$6,425* or more?	
. 2	No. Go to line 7.					
1.1	total amount child suppor	it you paid that creditor. E rt and alimony. Also, do r	Do not include pa not include payn	ayments for domestic sunents to an attorney for t		
,	ject to adjustme	ent on 4/01/19 and every	3 years after th	at for cases filed on or a	fter the date of adjustment.	
И У В		2 or both have primarily	=			
	ழ the 90 days b	pefore you filed for bankru	uptcy, did you pa	ay any creditor a total of	\$600 or more?	
	″∋. Go to line 7.					
-	reditor. Do	each creditor to whom you not include payments fo so, do not include payme	or domestic supp	ort obligations, such as	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
				S	\$	☐ Mortgage
	s Name		,	<u> </u>		Car
						Credit card
	Street Street					Loan repayment
						Suppliers or vendor
	lidy	State ZIP Code	-			Other
	.ery	CIGIO ZIF COUR				
				s	\$	☐ Mortgage
	· · :r's Name					☐ Car
						☐ Credit card
	Number Street					Loan repayment
						Suppliers or vendor
			_			① Other
		State ZIP Code				
					_	□
				\$	\$	☐ Mortgage
	overbar's Name		-	\$	\$	☐ Mongage
	os that's Name			\$	\$	
	ro char's Name			\$	\$	☐ Car☐ Credit card☐ Loan repayment
	os that's Name			\$	\$	☐ Car ☐ Credit card

Debtor 1	Yvette_	Marie	Webb	_ (Case number (if known)_	16-51563
	++ 4 7. →	Middle Name Last Name				
Insi corp age	dors indices y porations of wh ent, in the land has care sp	ere you filed for bankruptcy, did your relatives; any general partners; reach you are an officer, director, persone for a business you operate as a sound and alimony.	latives of any on in control, o	general partners; partners; partners	artnerships of which nore of their voting	n you are a general partner; securities; and any managing
1		ryments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tage 1			\$	\$	
	EH 1 -					
	;·	State ZIP Code	444.			
4				\$. \$	
	New					
	en,	State ZIP Code				
	insa.	re you filed for bankruptcy, did you		payments or trans	fer any property o	n account of a debt that benefited
		ments that benefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Wase 1			\$	\$	
	: .	State ZIP Code				
The state of the s				\$. \$	
	t.					
	ĒĒ,	State ZIP Code				

Within $\mathbb{T}_{\mathbb{R}^2}$			awsuit, court action, or admini		
List all such	• • • • • • • • • • • • • • • • • • • •	ases, small claims actions,	divorces, collection suits, paterni	y actions, supp	port or custody modificati
and clift -	1.29 S.				
M N					
☐ Yes in	to details.				
		Nature of the case	Court or agency		Status of the case
v 18			Court Name	-	—— Pending
					On appeal
			Number Street		Concluded
/>					
C_{eff}	·		City State	ZIP Code	
					—— Pending
Contract of	·		Court Name		-
_					On appeal
			Number Street		Concluded
r_{\perp}					
			City State	ZIP Code	
Yes .	formation below.				
T Yes		Describe the propo	erty	Date	Value of the property
Yes (erty	Date	
L Yes			erty	Date	Value of the property
L Yes	formation below.			Date	
L Yes	e dormation below.	Explain what happ	ened	Date	
L Yes	e dormation below.	Explain what happ	ened s repossessed.	Date	
L Yes	e dormation below.	Explain what happ	ened s repossessed. s foreclosed.	Date	
L Yes	e dormation below.	Explain what happ Property was Property was Property was	ened s repossessed. s foreclosed.	Date	
L Yes	ormation below.	Explain what happ Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	\$
L Yes	ormation below.	Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	· · · · · · · · · · · · · · · · · · ·	\$ Value of the proper
L Yes	ormation below.	Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	· · · · · · · · · · · · · · · · · · ·	\$
L Yes	State ZIP Cod	Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	· · · · · · · · · · · · · · · · · · ·	\$ Value of the proper
Yes .	State ZIP Cod	Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. erty	· · · · · · · · · · · · · · · · · · ·	\$ Value of the proper
Yes 1	State ZIP Cod	Explain what happ Property was Property was Property was Property was Describe the property Explain what happ	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. erty	· · · · · · · · · · · · · · · · · · ·	Value of the propert
Yes 1	State ZIP Cod	Explain what happ Property was Property was Property was Property was Describe the property Explain what happ Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. erty ened s repossessed. s foreclosed.	· · · · · · · · · · · · · · · · · · ·	\$ Value of the propert
L Yes	State ZIP Cod	Explain what happ Property was Property was Property was Property was Describe the property Explain what happ Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. erty ened s repossessed. s foreclosed.	· · · · · · · · · · · · · · · · · · ·	\$ Value of the proper

Debtor 1	Y^{i} : 1	Marie	Webb	Case number (if known) 16-51563	
		Middle Name Last Nar	me		
acc	eunts or No	Letore you filed for bankrupt	cy, did any creditor, includi use you owed a debt?	ng a bank or financial institution, set off any am	nounts from your
	Yas i	e ve tails.			
			Describe the action the credit	or took Date action was taken	Amount
	Chedit				_
	·1 - 4-				\$
	<u>.</u>				
	oz.	State ZIP Code	Last 4 digits of account num	nher XXXX-	
	Car.				
12. Wi! cre		you filed for bankrupto	y, was any of your property todian, or another official?	in the possession of an assignee for the benef	it of
anv.	e 11.	.trin Gifts and Contribut	tions		
13. Wit		⊕ you filed for bankrupt	cy, did you give any gifts w	ith a total value of more than \$600 per person?	
	Algorithms	tails for each gift.			
i	*(#*) **	· I value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
:		Save the Gift			\$
					\$
		State ZIP Code	•		
		;: to you			
	City	induce of more than \$600	Describe the gifts	Dates you gave the gifts	Value
					•
		ove the Gift			\$
4	-		-		\$
(•		
î î		Stale ZIP Code	•		
		o lo you			

Deble 1	Marie Middle Name Last	Webb	Case number (if kno	_{эмп)} 16-51563	
19. Within the are a line. No. Line. Yes		ptcy, did you transfer any proper sset-protection devices.)	ty to a self-settled trus	st or similar device of w	vhich you
		Description and value of the prope	erty transferred		Date transfer was made
No		-			
-		-			
Dr. H	Financial Accounts	s, Instruments, Safe Deposit	Boxes, and Storag	e Units	The state of the s
20. Within closed included broker	or transferred? ∨ings, money market,	or other financial accounts; cert atives, associations, and other fin	ificates of deposit; sha	•	
V No ∴ Yes	'ai ls.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	tution	xxxx	Checking		\$
r.t.	-		☐ Savings		
vis. Line Control Cont			☐ Money market ☐ Brokerage		
	State ZIP Code		Other		
	Stution	xxxx	☐ Checking ☐ Savings		\$
			☐ Money market		
-			☐ Brokerage		
<u></u>	State ZIP Code		☐ Other		
21. Do yo. securi		year before you filed for bankrup	otcy, any safe deposit	box or other depositor	y for
Y No L Ye	ails.				
		Who else had access to it?	Describe th	e contents	Do you still have it?
T	dution	Name			☐ No ☐ Yes
School of the second of the se	-		<u> </u>		
-		Number Street			
- G	State ZIP Code	City State ZIP Code			•

Debtor 1	Marie Last	Webb Case nu	mber (if known) 16-51563	
1 100		otcy, did you give any gifts or contributions with	n a total value of more than \$60	00 to any charity?
U Yes on the	tails for each gift or con	tribution.		
Garran de Brogner de la compa	ions to charities an \$600	Describe what you contributed	Date you contributed	Value
7.	-			\$
				\$
1.				
	ZIP Code			
Part	in Losses			
15. Within 1 disagre	you filed for bankrup yg?	tcy or since you filed for bankruptcy, did you lo	se anything because of theft, f	ire, other
Å	ails.			
	erty you lost and arred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pendiclaims on line 33 of Schedule A/B: Property.	Date of your loss ing insurance	Value of property lost
			<u> </u>	\$
	Payments or Tran	sfers		
16. Wit die your de In the	you filed for bankrup	tcy, did you or anyone else acting on your beha or preparing a bankruptcy petition? eparers, or credit counseling agencies for services		to anyone
√ ·. □	ails.			
		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				\$
	State ZIP Code			\$
	ess			
	Payment, if Not You	-	According to the state of the s	a della manda de la compania del compania de la compania del compania de la compania del la compania de la comp

Debtor :	Marie	VVebb	Case number (if known)_	16-51563	
	Middle Name Last	Name	· -		
		Description and value of any proper	rty transferred	Date payment or	Amount of
				transfer was made	payment
d company of the comp	:				
					\$
1					•
The state of the s					Ψ
-					
(* ·	State ZIP Code				
;	58				
	Payment, if Not You				
		Converse of the Converse of th			
17. Within 1		cy, did you or anyone else acting		nsfer any property	to anyone who
promi. Do ne:	deal with your credit yment or transfer that y	ors or to make payments to your	creditors?		
	, mont or transfer that y	ou notes on any re-			
₩ No.	mils.				
	ills.				
		Description and value of any prope	rty transferred	Date payment or transfer was	Amount of paymen
				made	
					•
					Ψ
					\$
(State ZIP Code				
] 18, Within	you filed for bankrug	otcy, did you sell, trade, or otherw	ise transfer any property	to anyone, other th	an property
transt	linary course of your	business or financial affairs?			
India:		nade as security (such as the grantion we already listed on this statement.	ng of a security interest or i	nortgage on your pro	operty).
V ta	is transfer that you ha	vo andddy nolod o'r thio olatoriont.			
Ů Ye	ails.				
		Description and value of property	Describe any property	or payments received	
		transferred	or debts paid in excha	inge	was made
*	Transfer				
· .					
C)	State ZIP Code				
	to you				
	Transfer				
A.					
To adoption of the second of t					
	State ZIP Code				

1	Marie	Webb	Case number (if known) 16-51563	· - ···
	Hidle Name Li	isi Name		
y y c	erty in a storage uni	t or place other than your home	within 1 year before you filed for bankruptcy	y ?
No				
Yes.	rils.	Who else has or had access to it	? Describe the contents	Do you s
		THIS disc has of had docess to h		have it?
				□ No
N.	ity	Name		🗖 Yes
ñ.		Number Street		
1.1		Number Suder		
Sec. of State		City State ZIP Code		
Ĉ	State ZIP Code	_		
Ш.				
<u>r</u> .	operty You Holo	l or Control for Someone Els	e	
you	• • • •	someone else owns? Include an	y property you borrowed from, are storing	for,
No	ne one.			
Yes.	oils.			
		Where is the property?	Describe the property	Value
C.		-		\$
£29	-	_ Number Street		
				
		_ City State	ZIP Code	
Co	State ZIP Code	·		
<u> </u>	s About Enviro	nmental Information		
e pe), the following de	finitions apply:		
virc			concerning pollution, contamination, relea	
zarc Slud		or material into the air, land, soil lling the cleanup of these substa	, surface water, groundwater, or other med nces, wastes, or material.	ium,
e m	m, facility, or prop	erty as defined under any enviro	nmental law, whether you now own, operat	e, or
z.:		ze it, including disposal sites.		
.zar c			azardous waste, hazardous substance, toxi	c
bst	-	t, contaminant, or similar term.		
t all	es, and proceeding	gs that you know about, regardle	ss of when they occurred.	
s an	unit notified you	that you may be liable or potentia	lly liable under or in violation of an environ	mental law?
. Y.	'y .			
		Governmental unit	Environmental law, if you know it	Date of notice
			· · · · · · · · · · · · · · · · · · ·	
N			<u> </u>	
Na:-		Governmental unit		
ā		Number Street	_	
_		_ City State ZIP Code	<u> </u>	
-				
=	Stute 710 Code	_		

Debtor 1	Marie	V√ebb	Case number (if known) 16-51563	
	Title Name Last	l Name	Case Harrisa (Wassin)	
25. Havo y	governmental unit o	of any release of hazardous	naterial?	
₩ No				
Yes.	ils.			
		Governmental unit	Environmental law, if you know it	Date of notice
1				
No.		Governmental unit		
\overline{n}		Number Street		
-		City State ZIP C	ode.	
		Only State Line		
c i:	State ZIP Code	_		
26. Have y	n any judicial or ac	dministrative proceeding un	der any environmental law? Include settlements	and orders.
₩ No				
₩ Ne	ils.			
			Mark or of the	Status of the
and a second		Court or agency	Nature of the case	case
Car				
Cu.		Court Name		Pending
May proposed the		Oddit Hame		On appeal
_		- Number Circuit		☐ Concluded
		Number Street		Concluded
Cas		_		
g Cas		City State	ZIP Code	
THE T	s About Your Bu	siness or Connections t	o Any Business	
27. Within	ou filed for bankru	ptcv. did vou own a busines	s or have any of the following connections to a	ny business?
			her activity, either full-time or part-time	•
	· · · · · · · · · · · · · · · · · · ·	pany (LLC) or limited liabilit		
ā	artnership		, , , , , , , , , , , , , , , , , , , ,	
ā	•	executive of a corporation		
		· •		
y 1	east 5% of the voti	ng or equity securities of a	corporation	
No No	⇒ applies. Go to I	Part 12.		
Ŭ Ye-		II in the details below for each	ch business.	
	mppy and to are in	Describe the nature of the l		umber
		;	Do not include Social Se	
		The state of the s	Do not menue Social Se	•
			EIN:	
k . 1		_		
		Name of accountant or boo	kkeeper Dates business existed	
		- :		
•			From To _	
Ċ	State ZIP Code	- !		
A A		Describe the nature of the I	pusiness Employer Identification r	umber
		_	Do not include Social Se	
\$ 31				
***************************************			EIN:	
Ť.		-		
		Name of accountant or boo	kkeeper Dates business existed	
		_		
			From To _	
Č.	State ZIP Code	-		

Official For:

16-51563-pjs

Statement of Financial Affairs for Individuals Filing for Bankruptcy
16-51563-pjs

Doc 14

Filed 08/31/16

Entered 08/31/16 12:33:05

Page 44 of 45

ebtor 1		Case number (if known)					
	First Name Middle Name Last N	First Name Middle Name Last Name					
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.				
	Business Name		EIN:				
	Number Street	Name of accountant or bookkeeper	∐ Dates business existed ☐				
	City State ZIP Code		From To				
ins	thin 2 years before you filed for bankrup titutions, creditors, or other parties. No	tcy, did you give a financial statement to anyone a	about your business? Include all financial				
	Yes. Fill in the details below.						
•		Date issued					
	Name	MM / DD / YYYY					
	Number Street						
	City State ZIP Code						
Part 1	12: Sign Below						
aı in	nswers are true and correct. I understan	et of Financial Affairs and any attachments, and I of that making a false statement, concealing proper result in fines up to \$250,000, or imprisonment for	erty, or obtaining money or property by fraud				
3	Signature of Debtor 2						
	Date 8 - 3/-/6	Date					
D	old you attach additional pages to <i>Your S</i> No Yes	Statement of Financial Affairs for Individuals Filing	д тог <i>вапкгиртсу</i> (Опісіаі Form 107)?				
	old you pay or agree to pay someone wh	o is not an attorney to help you fill out bankruptcy	r forms?				
I	Yes, Name of person	Att	ach the <i>Bankruptcy Petition Preparer's Notice,</i> eclaration, and Signature (Official Form 119).				
L							

Official Form 107